FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA	ATION		
i Ortivi i	(See instructio	ons)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
John Hancock	Life Insurance Company (USA)	Federal Political Action (	Com-	
ADDRESS (number and	street) 601 Congress St		11111	
(Check if address is changed)	FL <sub>1</sub> 13	<u> </u>	11111	
	Boston		MA	02210   -
		CITY▲	STATE▲	ZIP CODE 🛦
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-	,		
(Check if address is changed)	sconcannon@jhanco	ock.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)	s   <b>N/A</b>			
2. DATE M. M.	M / D D / Y Y Y			
2. DATE 0.1			_	
3. FEC IDENTIFICA	ATION NUMBER	C C00137265		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the best of my kno	owledge and belief it is true, correct	t and complete	
	Treasurer Thomas Samolu	de		
Type or Print Name of	TreasurerThomas Samoru	IK.		
Signature of Treasure	Electronically Filed by Thomas S	Samoluk	Date 0 1	28 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information ma	y subject the person signing this S	•	
Office		For further information		
Use		Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)